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11 UNITED STATES DISTRICT COURT  
12 CENTRAL DISTRICT OF CALIFORNIA

13 ALEX AGUILAR, JR., and P.A., by  
14 and through her Guardian Ad Litem,  
15 Florence Ahumada, AND THE  
16 ESTATE OF ALEX AGUILAR,  
17 SR.,

18 Plaintiffs,

19 v.

20 CITY OF LOS ANGELES, ET AL.,

21 Defendants.

CASE NO. 17-04382-CBM  
(MRWx)

[HONORABLE CONSUELO B.  
MARSHALL]

**PLAINTIFFS' MOTION IN  
LIMINE NO. 2 TO EXCLUDE  
CERTAIN EXPERT OPINIONS  
BY DEFENSE EXPERTS VILKE  
AND KROLL**

*[Filed concurrently with Declaration  
of Ronald O. Kaye and Exhibits;  
Declaration of Caitlin S. Weisberg  
and Exhibits]*

Date: October 2, 2018

Time: 2:30 p.m.

Ctrm: 8B

1 TO THE HONORABLE COURT, ALL PARTIES HEREIN AND THEIR  
2 RESPECTIVE ATTORNEYS OF RECORD:

3 Plaintiffs, by and through counsel of record, respectfully submit this Motion  
4 *in Limine* No. 2 To Exclude Certain Expert Opinions by Defense Experts Vilke and  
5 Kroll.

6 This motion is made following a meet and confer with opposing counsel as  
7 required by Local Rule 7-3. The meet and confer took place on August 21, 2018.

8 Plaintiffs' Motion is based on the attached Memorandum of Points and  
9 Authorities, the Declaration of Ronald O. Kaye and exhibits thereto, the  
10 Declaration of Caitlin S. Weisberg and exhibits thereto, all pleadings and papers on  
11 file in this action, and such other evidence and argument as may be presented on  
12 behalf of Plaintiffs at the hearing on the motion.

13 Respectfully Submitted,

14 Kaye, McLane, Bednarski & Litt, LLP

15  
16 DATED: September 4, 2018

By: /s/ Caitlin S. Weisberg  
Ronald O. Kaye  
Caitlin S. Weisberg  
Attorneys for Plaintiffs

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## **MEMORANDUM OF POINTS AND AUTHORITIES**

### **I. INTRODUCTION & FACTUAL BACKGROUND**

On June 9, 2016, Alex Aguilar was taken into the custody of the Los Angeles Police Department (“LAPD”) and transported to Harbor station. At the station, Defendants Medina and Melero initiated a strip search. During the search, Defendants observed Mr. Aguilar place what they suspected to be a bindle of narcotics in his mouth and responded by using force. Hands-on attempts to control Mr. Aguilar quickly escalated to five separate applications of Defendant Medina’s Taser and three head strikes by Defendant Melero over a period of less than a minute. The use of force caused the bindle to lodge in Mr. Aguilar’s throat, preventing him from breathing and resulting in unconsciousness (shortly after the head strikes).

When they noticed that Mr. Aguilar was unconscious, Defendants began chest compressions and called for a rescue ambulance. However, they did not follow standard protocol and training for airway obstructions, which directs first responders to visualize the obstructed airway and, if possible, remove the object with a finger sweep.

As a result of defendants’ use of force and unreasonable / deliberately indifferent response to Mr. Aguilar’s serious medical condition, Mr. Aguilar died. The autopsy confirmed death by asphyxiation.

Defendants have disclosed several experts, including: (1) Mark Kroll, a bioelectricity/Taser expert; and (4) Gary Vilke, a medical expert. Mr. Kroll and Dr. Vilke have offered opinions regarding the drugs in Mr. Aguilar’s system at the time of his death that are, for the reasons argued in this motion, inadmissible under the Federal Rules of Evidence and Federal Rules of Civil Procedure. The opinions sought to be excluded in this motion are as follows:

#### **A. Gary Vilke**

- Opinion #4: “The drugs that Mr. Aguilar had in his system,



1 including methamphetamine and heroin, likely caused him to act in  
 2 an irrational and impulsive manner, contributing to his death.”

3 Vilke Report (Ex. I) at 4, 9-10.<sup>1</sup>

4 B. Mark Kroll

- 5 • Opinion #6: “Due to the presence of multiple analgesic drugs, Mr.  
 6 Aguilar felt zero to minimal pain from the drive (contact or touch)-  
 7 stuns.” Kroll Report (Ex. M) at 8, 18, 19-20, 26.

8 These opinions refer to the toxicology results of the autopsy on Mr. Aguilar  
 9 which state that Mr. Aguilar had alcohol (BAC .071), methamphetamine (330  
 10 nanograms/mL) and morphine/heroin (.03 micrograms/mL) in his bloodstream.  
 11 Vilke Depo. (Ex. L) at 103:20-104:10; Kaye Decl. ¶ 4.

## 12 II. LEGAL STANDARD

13 The admissibility of expert testimony is governed by FRE 702. *Daubert v.*  
 14 *Merrell Dow Pharms., Inc.*, 509 U.S. 579, 590 (1993). The proponent of the expert  
 15 testimony bears the burden of proving admissibility. *Lust v. Merrell Dow*  
 16 *Pharmaceuticals, Inc.*, 89 F.3d 594, 598 (9th Cir.1996); *see also Daubert v.*  
 17 *Merrell Dow Pharmaceuticals, Inc.*, 43 F.3d 1311, 1316 (9th Cir.1995) (“the party  
 18 presenting the expert must show that the expert's findings are based on sound  
 19 science”).

20 In *Daubert*, the Court held that a “trial judge must ensure that any and all  
 21 scientific testimony or evidence admitted is not only relevant, but reliable.”  
 22 *Daubert*, 509 U.S. at 589; *See Kumho Tire Co.*, 526 U.S. at 147 (extending  
 23 *Daubert*’s requirements of relevance and reliability to non-scientific testimony).  
 24 To establish relevance, the testimony must be helpful to the trier of fact and  
 25 beyond the common knowledge of jurors. Fed. R. Evid. 702; *Daubert*, 509 U.S. at  
 26

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27 <sup>1</sup> Unless otherwise noted, the documents and evidence cited in this motion  
 28 are attached as exhibits to the Declaration of Ronald O. Kaye In Support of  
 Plaintiffs’ Motions *in Limine* (Dkt. No. 115).

1 597.

2 The trial court acts as the gatekeeper to ensure reliability when applying the  
3 *Daubert* factors in scientific and police practice testimony. *Hangerter v. Provident*  
4 *Life & Accident Ins. Co.*, 373 F.3d 998, 1017-18 (9th Cir. 2004). Evidence is  
5 admissible under *Daubert* if: (1) the expert is qualified to testify competently  
6 regarding the matters he intends to address; (2) the methodology by which the  
7 expert reaches his conclusions is sufficiently reliable as determined by the sort of  
8 inquiry mandated in *Daubert*; and (3) the testimony assists the trier of fact, through  
9 the application of scientific, technical, or specialized expertise, to understand the  
10 evidence or to determine a fact in issue. *See* Fed. R. Evid. 702; *United States v.*  
11 *Frazier*, 387 F.3d 1244, 1260 (11th Cir. 2004) (citing *Daubert*, 509 U.S. at 589).

12 To establish reliability, the testimony must be derived from valid scientific  
13 or specialized knowledge, the witness must possess sufficient expertise, and the  
14 state of pertinent scientific or specialized knowledge must permit the assertion of a  
15 reasonable opinion. *United States v. Finley*, 301 F.3d 1000, 1007 (9th Cir. 2002).  
16 Testimony is grounded in valid knowledge if it is “based on the methods and  
17 procedures of science [or other expertise] rather than on subjective belief or  
18 unsupported speculation; the expert must have good grounds for his or her belief.”  
19 *Reger v. A.I. DuPont Hosp. for Children of Nemours Foundation*, 259 Fed. App’x  
20 499, 500 (3d Cir. 2008) (quoting *Schneider v. Fried*, 320 F.3d 396, 404 (3d Cir.  
21 2003) and *Daubert*, 509 U.S. at 590).

22 Assessment of the expert’s qualifications to testify is not answered in the  
23 abstract but based on whether the expert’s “qualifications provide a foundation for  
24 a witness to answer a specific question.” *Smelser v. Norfolk Southern Ry. Co.*, 105  
25 F.3d 299, 303 (6th Cir.1997) (internal quotations omitted). “The trial court must  
26 determine whether the expert's training and qualifications relate to the [specific]  
27 subject matter of his proposed testimony.” *Id.* A district court “must continue to  
28 perform its gatekeeping role by ensuring that the actual testimony does not exceed

1 the scope of the expert's expertise, which if not done can render testimony  
2 unreliable under Rule 702.” *Wheeling Pittsburgh Steel Corp. v. Beelman River*  
3 *Terminals, Inc.*, 254 F.3d 706, 715 (8th Cir. 2001) (concluding that hydrologist  
4 was qualified to testify about flood-risk management but not about safe  
5 warehousing practices).

6 A district court may satisfy its so-called “gatekeeping” function by  
7 conducting a pretrial hearing, or by ruling on a Rule 702 objection at trial, “so long  
8 as the court has sufficient evidence to perform ‘the task of ensuring that an expert’s  
9 testimony both rests on a reliable foundation and is relevant to the task at hand.’”  
10 *Goebel v. Denver & Rio Grande W. R.R. Co.*, 215 F.3d 1083, 1087 (10th Cir.  
11 2000) (quoting *Daubert*, 509 U.S. at 597). Although “the gatekeeper inquiry under  
12 Rule 702 is ultimately a flexible determination, . . . a district court, when faced  
13 with a party’s objection, must adequately demonstrate by specific findings on the  
14 record that it has performed its duty as gatekeeper.” *Id.* at 1088 (citation omitted).

### 15 **III. ARGUMENT**

#### 16 **A. Defense Expert Gary Vilke (Medical)**

17 According to his report, Defendants’ medical expert, Dr. Gary Vilke, is a  
18 “board-certified emergency department physician with substantial experience in  
19 sudden cardiac arrest and sudden cardiac death, as well as in-custody death” and is  
20 “an independent researcher on the physiologic effects of TASER Electronic  
21 Control Devices (ECDs) on humans.” Vilke Report (Ex. I) at 1. Dr. Vilke offers  
22 four opinions in his initial expert report and three rebuttal opinions to Plaintiffs’  
23 experts. Vilke Report (Ex. I) at 4; Vilke Rebuttal Report (Ex. K) at 2.

24 The fourth opinion in Dr. Vilke’s initial report is the subject of this motion  
25 *in limine*: “4. The drugs that Mr. Aguilar had in his system, including  
26 methamphetamine and heroin, likely caused him to act in an irrational and  
27 impulsive manner, contributing to his death.” Vilke Report (Ex. I) at 4, 9-10. For  
28 the reasons stated in Plaintiffs Motion in Limine No. 1 (to exclude bad acts), the

1 existence of drugs in Mr. Aguilar's system is irrelevant or minimally relevant and  
2 unfairly prejudicial and therefore should be excluded under Federal Rules of  
3 Evidence 401/402 and 403. If the court grants that portion of Plaintiffs' Motion *in*  
4 *Limine* No. 1, then this argument is moot. Even if that motion is denied, however,  
5 Dr. Vilke's Opinion No. 4 should be excluded under Federal Rule of Evidence 702  
6 because: (1) Dr. Vilke is not a toxicology expert and is otherwise unqualified to  
7 opine on the specific effect of the drugs in Mr. Aguilar's system; (2) the opinion is  
8 not based on Dr. Vilke's scientific, technical, or other specialized knowledge and  
9 therefore will not assist the jury in understanding the evidence or determining the  
10 facts, and (3) the testimony is not the product of reliable principles and methods  
11 applied reliably in this case.

12 **1. Dr. Vilke's Opinion and Purported Factual Basis**

13 The entirety of Dr. Vilke's Opinion No. 4 states:

- 14 4. The drugs that Mr. Aguilar had in his system, including  
15 methamphetamine and heroin, likely caused him to act in an  
16 irrational and impulsive manner, contributing to his death.

17 On autopsy, Mr. Aguilar was found to have methamphetamine  
18 as well as heroin in his bloodstream. These illicit drugs commonly  
19 cause people to act in [an] irrational and often impulsive manner.  
20 They can cause agitation and result in people doing behaviors that  
21 they might not otherwise normally do. Mr. Aguilar stuffed a baggy of  
22 drugs down his throat despite the fact that a rational person would  
23 likely realize it was too large to easily swallow. And despite being  
24 unable to swallow the baggy, he would not spit it out as ordered by  
25 the officers. The drugs in his system likely were altering his ability to  
26 think and function rationally and clearly and likely contributed to his  
27 decision not to spit out the baggy, thus contributing to his death by  
28 asphyxiation.

25 Vilke Report (Ex. I) at 9-10.

26 Dr. Vilke's opinion does not purport to analyze the substances in Mr.  
27 Aguilar's system or provide data or information on how the levels of those  
28 substances correspond to the amount of drugs consumed by Mr. Aguilar or the

1 level of intoxication that would result from the concentrations in Mr. Aguilar's  
2 bloodstream:

3 Q: Okay. Now, you're not a certified toxicologist. Do you have any  
4 specific expertise about the impact of the actual levels of these  
5 narcotics or alcohol substances in the blood as to whether they  
influence individuals' behaviors?

6 A: With regards to alcohol, I have lots of experience with different  
7 levels of alcohol and how it can affect behavior. Regarding  
8 methamphetamine, typically either they exhibit clinical signs that  
9 confirm my measurements, but as far as a level of 330 versus 350, I  
10 couldn't give you expected changes on that. But the presence of  
11 methamphetamine plus his sort of hyperactive behavior that was  
report when he was being picked up would be consistent with having  
methamphetamine in his system.

12 Q: Okay. So . . . With regard to morphine, similar to  
13 methamphetamine, you don't have an opinion with regard to the blood  
14 level that would be a necessary factor? You're basing it on behavior?

15 A: Correct.

16 Q: Okay. And with regard to his hyperactivity . . . explain to me what  
was his hyperactivity.

17 A: He was talking a lot and moved a lot, very fidgety in movement a  
18 lot prior to his coming into the jail when they were picking him up  
19 was the report that I reviewed.

20 Vilke Depo. (Ex. L) at 104:11-105:16. Dr. Vilke testified that he has no idea when  
21 the drugs were ingested or how long they were in his system. Vilke Depo. (Ex. L)  
22 at 124:11-14. Presumably, the absence of this information is because Dr. Vilke was  
23 not qualified to offer these opinions or information.

24 Rather, Mr. Vilke's opinion is based on his own assessment of the rationality  
25 of Mr. Aguilar's actions and certain officers' description of Mr. Aguilar's  
26 behavior—that he was acting jittery and appeared to be under the influence—  
27 testimony which is contradicted by other officers. But the Defendants who knew  
28 Mr. Aguilar through prior contacts, and were actually qualified to assess whether  
someone is under the influence, testified that Mr. Aguilar did not appear to be

1 intoxicated or high. Officer Melero was specially trained and qualified to recognize  
2 persons under the influence of drugs and alcohol. Melero Depo. (Ex. B) at 48:17-  
3 49:20. He testified that he did not believe Mr. Aguilar was under the influence of  
4 narcotics and did not observe any red flags in Mr. Aguilar's behavior at the time he  
5 was arrested or any time before arriving at Harbor Division station. Melero Depo.  
6 (Ex. B) at 48:11-49:25. Officer Lopez, the first on the scene who knew Mr. Aguilar  
7 from prior contacts, testified that Mr. Aguilar's behavior was always the same with  
8 him—cooperative, talkative, joking around. Lopez Depo. (Ex. G) at 34:4-18,  
9 38:16-39:7. Mr. Aguilar did not engage in aggressive behavior and Lopez did not  
10 think that he was under the influence of narcotics. Lopez Depo. (Ex. G) at 38:16-  
11 39:3.

12 These Defendant officers' characterization of the Decedent is corroborated  
13 by the videos of Decedent in custody, both while in the patrol car and in the  
14 station. *See* Exhibits filed with the Court in Opposition to Defendants Motion for  
15 Summary Judgment: Ex. 2 (Patrol Car Video); Ex. 11 (Booking Area Video); Ex.  
16 12 (Watch Commander Video) (Dkt. Nos. 60-62).

17 **2. Dr. Vilke Is Not Qualified to Opine on Mr. Aguilar's**  
18 **Toxicology or the Physiological Effects of the Substances in**  
19 **Mr. Aguilar's System**

20 Mr. Vilke is not a toxicologist. Vilke Depo. (Ex. L)103:16-19. Mr. Vilke did  
21 not examine Mr. Aguilar, did not conduct the toxicology test, and did not interpret  
22 the coroner's toxicology test. Vilke Report (Ex. I) at 9-10. A general medical  
23 degree does not give Mr. Vilke the expertise in toxicology necessary to serve as the  
24 basis for an opinion on toxicology and the effect of the drugs in Mr. Aguilar's  
25 system on his behavior. *Higgins v. Koch Development Corp.*, 997 F. Supp. 2d 924,  
26 930 (S.D. Ind. 2014) (“[M]erely possessing a medical degree does not qualify its  
27 holder as an expert in all medical related fields.”); *Jones v. Lincoln Elec. Co.*, 188  
28 F.3d 709, 724 (7th Cir. 1999) (expert witness admitted he was “not a toxicologist  
and that toxicology and how certain substances are absorbed into the body were



1 areas that were outside of his expertise” and therefore “the underlying basis for the  
2 medical conclusions to which [he] testified . . . were rooted in medical knowledge  
3 and training which [he] did not have.”).

4 The substance of Mr. Vilke’s opinion makes clear that it is not based on any  
5 toxicology expertise and lacks any specificity about the drugs that were in Mr.  
6 Aguilar’s system and what effect they may or may not have had on his behavior.  
7 His entire opinion is essentially the generic observation that “illicit drugs  
8 commonly cause people to act in irrational and often impulsive manner.” Vilke  
9 Report (Ex. I) at 9-10. On its face, nothing in this opinion reflects any toxicological  
10 or relevant specialized expertise, and therefore the Court should rule that Mr. Vilke  
11 is not qualified to opine on the subject matter represented by Opinion No. 4, *i.e.*,  
12 the toxicology results from Mr. Aguilar’s autopsy and what they may or may not  
13 indicate regarding his behavior prior to death.

14 **3. Opinion No. 4 Is Not the Proper Subject of Expert**  
15 **Testimony Because It Is Not Based on “Scientific,**  
16 **Technical, or Other Specialized Knowledge [that] Will Help**  
**the Trier of Fact.”**

17 Dr. Vilke’s Opinion No. 4 has three bases, none of which are “scientific,  
18 technical, or otherwise specialized”: (1) illicit drugs cause irrational, impulsive,  
19 and agitated behavior (Vilke Report (Ex. I) at 9-10); (2) the officer’s description of  
20 Mr. Aguilar as talkative and fidgety (Vilke Depo. (Ex. L) at 104:11-105:16); and  
21 (3) Dr. Vilke’s own belief that Mr. Aguilar was attempting to swallow an overlarge  
22 bindle of narcotics and that this action was irrational (Vilke Report (Ex. I) at 10).

23 None of these bases reflect any specialized knowledge possessed by Dr.  
24 Vilke, but rather are a matter of general common knowledge and argument. In fact,  
25 with respect to the first two bases, Defendant Melero, certified under Health and  
26 Safety Code § 11550 and the Driver Apprehension Program to recognize the signs  
27 and symptoms of drug and alcohol intoxication (Melero Depo. (Ex. B) at 48:11-  
28 49:25), is substantially more of an expert than Dr. Vilke on these matters.

1 Dr. Vilke's conclusion that Mr. Aguilar's intoxication contributed to his  
2 death because a rational (not intoxicated) person would not have attempted to  
3 swallow the bindle and would have complied with the officer's commands is pure  
4 argument with no basis in any medical expertise of any kind. Contrary to Dr.  
5 Vilke's line of reasoning, there is no evidence that Mr. Aguilar was attempting to  
6 swallow the bindle versus hide it in his mouth. Further, it is perfectly rational  
7 (although perhaps not prudent) for a person to attempt to hide narcotics from law  
8 enforcement, whether under the influence or sober. Nothing about these particular  
9 actions by Mr. Aguilar are manifestations of drug intoxication, and the Federal  
10 Rules of Evidence do not permit an expert to be a mouthpiece for arguments within  
11 the common understanding and experience of jurors. *See United States v. Vallejo*,  
12 237 F.3d 1008, 1019, *opinion amended on denial of reh'g*, 246 F.3d 1150 (9th Cir.  
13 2001) ("To be admissible, expert testimony must (1) *address an issue beyond the*  
14 *common knowledge of the average layman*, (2) be presented by a witness having  
15 sufficient expertise, and (3) assert a reasonable opinion given the state of the  
16 pertinent art or scientific knowledge." (emphasis added)); *Hubbard v. Rite Aid*  
17 *Corp.*, 433 F. Supp. 2d 1150, 1160-61 (S.D. Cal. 2006) (excluding medical expert  
18 on topic of whether the conditions described in medical records substantially  
19 limited the plaintiff's daily activities under the ADA definition of disability).

20 The reliability prong of the *Daubert* analysis requires that proffered expert  
21 testimony be "scientific," *i.e.* grounded in methods and procedures of science, and  
22 constitute "knowledge," *i.e.* be something more than subjective belief or  
23 unsupported assumptions. *McDowell v. Brown*, 392 F.3d 1283 (11th Cir. 2004). In  
24 *McDowell*, the court held that the requirements of *Daubert* were not satisfied when  
25 the neurosurgeon in a medical malpractice case testified that the patient's condition  
26 had worsened with a delay in treatment based on a common-sense "the earlier, the  
27 better" theory within the average juror's knowledge. Although the expert provided  
28 a study in support of his opinion that concerned a delay that was twice as long of



1 the patient in the case, it did not change the fundamental basis of the expert's  
2 opinion as one within the general knowledge of the jury. Similar to the  
3 neurosurgeon's "the earlier, the better" theory in *McDowell*, Dr. Vilke's opinion  
4 that the substances Mr. Aguilar ingested caused him to be irrational and impulsive  
5 is based on Dr. Vilke's common-knowledge opinion about the nature of drugs and  
6 their effects. He is not applying any medical or scientific expertise to the issue.

7 Thus, Dr. Vilke's opinions that Mr. Aguilar's behavior was the result of drug  
8 intoxication and contributed to his cause of death are not based on any "scientific,  
9 technical, or other specialized knowledge" and are therefore inadmissible under  
10 Federal Rule of Evidence 702(a).

11 **4. Dr. Vilke's Opinion No. 4 Is Inadmissible Because He Fails**  
12 **to Reliably Apply "Reliable Principles and Methods" to the**  
13 **Facts of This Case.**

14 Federal Rule of Evidence 702 requires that expert testimony "is the product  
15 of reliable principles and methods" and that those principles and methods have  
16 been "reliably applied . . . to the facts of the case." Fed. R. Evid. 702(c), (d).  
17 Reliability is determined by assessing "whether the reasoning or methodology  
18 underlying the testimony is scientifically valid," whereas relevance depends upon  
19 "whether [that] reasoning or methodology properly can be applied to the facts in  
20 issue." *Daubert*, 509 U.S. at 592-93. "In a case involving scientific evidence,  
21 evidentiary reliability will be based upon scientific validity, which is, in turn,  
22 assessed in large part by the degree to which the theories propounded by  
23 the expert have been subjected to and survived scrutiny in the relevant scientific  
24 community." *Barabin v. AstenJohnson, Inc.*, 700 F.3d 428 (9th Cir. 2012).

25 Nothing in Dr. Vilke's Opinion No. 4 is the product of scientifically  
26 "reliable principles and methods." It is unsupported by any principles or methods  
27 regarding the levels of drugs in Mr. Aguilar's system, his tolerance for drugs, the  
28 timing of his ingestion of drugs or their clearance from his system, or any other  
specific data. Dr. Vilke's conclusory statement that doing drugs made Mr. Aguilar

1 irrational and that irrationality contributed to his death is not based in any scientific  
2 method or principles and is therefore not reliable. *See, e.g., U.S. v. Scholl*, 166 F.3d  
3 964, 971 (9th Cir. 1999) (excluding expert testimony where expert was unable to  
4 identify any support in the psychiatric literature for her position that gamblers may  
5 believe they are truthfully representing wins and losses); *Reger v. A.I. DuPont*  
6 *Hosp. for Children of Nemours Foundation*, 259 Fed.Appx. 499, 500 (3d Cir.  
7 2008) (expert testimony was not admissible where it was based on subjective belief  
8 and lacked any support by citation or reference to any scientific data or tests).

9 Dr. Vilke's reasoning that Mr. Aguilar's attempt to swallow the bindle was  
10 irrational, and therefore the product of drug intoxication, likewise fails to reflect  
11 any scientifically reliable principles and methods. Dr. Vilke is not a psychologist  
12 or a psychiatrist. Vilke Depo. (Ex. L) at 114:1-9; 114 21-23. Dr. Vilke testified: "I  
13 don't know what was going on in his mind at the time that he did that. Correct."  
14 Vilke Depo. (Ex. L) at 114:24-115:8. Mr. Vilke's speculation about rational  
15 behavior is closing argument material, not the product of the scientific method (or  
16 Mr. Vilke's personal expertise). It offers no scientific support for his opinion on  
17 the effects of drugs on Mr. Aguilar's behavior and thus cannot constitute  
18 appropriate expert evidence.

19 **5. Dr. Vilke's Opinion No. 4 Is Not Relevant To Any Claim or**  
20 **Defense At Issue in the Case and Is Therefore Inadmissible**  
21 **Under Federal Rules of Evidence 401/402 and 403.**

22 In essence, Dr. Vilke's opinion is the officers described Mr. Aguilar's  
23 behavior and actions as agitated and irrational, which is consistent with him having  
24 been under the influence of drugs. Even accepting that the behavior described by  
25 the officers could be described as agitated and irrational, which Plaintiffs do not  
26 concede, the cause of the described behavior is not relevant to any issue, claim, or  
27 defense in the litigation. Whether it was due to drugs, an anxiety disorder, the  
28 stress of being arrested, or any other cause, the behavior remains the same. It was  
Mr. Aguilar's behavior, not the underlying cause (unknown to the officers) that

1 was the basis for the Defendants’ use of force in this case. The reasonableness of  
2 that use of force would not change had Mr. Aguilar’s behavior been attributable to  
3 any of these causes. Similarly, it is undisputed that Mr. Aguilar placed the bindle  
4 of narcotics in his mouth. The rationality of that decision, and whether in was  
5 influenced by drugs, make no difference to any of the issues, claims, or defenses in  
6 this litigation.

7 The *Daubert* Court noted that Rule 403 was an important tool to ensure  
8 proper expert testimony: “Expert evidence can be both powerful and quite  
9 misleading because of the difficulty in evaluating it. Because of this risk, the judge  
10 in weighing possible prejudice against probative force under Rule 403 of the  
11 present rules exercises more control over experts than over lay witnesses.”  
12 *Daubert*, 509 U.S. at 595 (*quoting* Weinstein, “Rule 702 of the Federal Rules Is  
13 Sound; It Should Not Be Amended,” 138 F.R.D. 631, 632 (1991)). On remand in  
14 *Daubert*, the Ninth Circuit quoted that language and observed that “[f]ederal  
15 judges must therefore exclude proffered scientific evidence under Rules 702 and  
16 403 unless they are convinced that it speaks clearly and directly to an issue in  
17 dispute in the case, and that it will not mislead the jury.” *Daubert v. Merrell Dow*  
18 *Pharmaceuticals, Inc.*, 43 F.3d 1311, 1321 (9th Cir. 1995). Dr. Vilke’s Opinion  
19 No. 4 is irrelevant and unfairly prejudicial character evidence masquerading as  
20 expert opinion. It should be excluded under Federal Rule of Evidence 401/402 and  
21 403.

22 **B. Defense Expert Mark Kroll (Taser / Bioelectricity)**

23 Mark Kroll, Defendants’ Taser expert, is a “biomedical scientist with a  
24 primary specialty in bioelectricity or the interaction of electricity and the body.”  
25 Kroll Report (Ex. M) at 5. He is not a medical doctor and has no toxicology  
26 expertise. Kroll Depo. (Ex. O) at 14:8-17:20, 84:5-8, 95:4. Mr. Kroll offered 12  
27 opinions in his initial expert report and various rebuttal opinions to Plaintiffs’  
28 experts in his rebuttal report. Kroll Report (Ex. M) at 8-9; Kroll Rebuttal Report

(Ex. N) at 6-12.

This motion in limine seeks to exclude Mr. Kroll's sixth listed opinion: "6. Due to the presence of multiple analgesic drugs, Mr. Aguilar felt zero to minimal pain from the drive (contact or touch)-stuns." Kroll Report (Ex. M) at 8, 18, 19-20, 26. As with Dr. Vilke's objectionable opinion on the drugs in Mr. Aguilar's system, the issue will be moot if the Court grants Plaintiffs' Motion in Limine no. 1 and excludes the evidence on 401/402 and/or 403 grounds. In addition, Mr. Kroll's Opinion No. 6 should be excluded under Federal Rule of Evidence 702 because: (1) Dr. Kroll is not a toxicology expert or otherwise qualified to opine on the analgesic effect of the drugs in Mr. Aguilar's system; (2) the testimony is not based on sufficient facts or data; and (3) the testimony is not the product of reliable principles and methods applied reliably in this case.

**1. Mr. Kroll's Opinion and Purported Factual Basis**

The entirety of Mr. Kroll's Opinion No. 6 is set forth in the following portions of his report:

6. Due to the presence of multiple analgesic drugs, Mr. Aguilar felt zero to minimal pain from the drive (contact or touch)-stuns. [Kroll Report (Ex. M) at 8, 26]

Trigger Pull # 1 . . . According to the testimony of Ofc. Medina, this drive-stun was ineffective. That is consistent with the analgesic effects of the morphine, amphetamine, methamphetamine, and ethanol found in the tissues.<sup>151-54</sup> [Kroll Report (Ex. M) at 18]

Trigger Pull # 2 . . . With a sober person, there is some control due to pain. However, with the multiple analgesics in Mr. Aguilar, there was no pain involved and hence no pain control effect. [Kroll Report (Ex. M) at 19-20]

The authorities cited by Mr. Kroll are as follows:

151. Colville KI, Chaplin E. Sympathomimetrics as Analgesics: Effects of Methoxamine, Methamphetamine, Metaraminol and Norepinephrine. Life Scie (1962) 1964; 3:315-322.

152. Evans WO, Bergner DP. A Comparison of the Analgesic Potencies of Morphine, Pentazocine, and a Mixture of

1 Methamphetamine and Pentazocine in the Rat. J New Drugs. 1964;  
2 4(2):82-85.

3 153. James MF, Duthie AM, Duffy BL, McKeag AM, Rice CP.  
4 Analgesic effect of ethyl alcohol. Br. J. Anaesth. 1978; 50(2):139-141.

5 154. Woodrow KM, Eltherington LG, Feeling no pain: alcohol as an  
6 analgesic. Pain. 1988; 32(2):159-163.

7 Kroll Report (Ex. M) at 53. These studies do not address pain in humans caused by  
8 electronic control devices (e.g., Tasers), and they do not stand for the proposition  
9 that any amount of the studied substances reduces the pain experienced by a human  
10 subject to zero or close to zero. Weisberg Decl. ¶ 3.

11 **2. Mr. Kroll Is Not Qualified to Opine on Mr. Aguilar's**  
12 **Toxicology or the Analgesic Effects of the Substances in Mr.**  
13 **Aguilar's System**

14 Mr. Kroll does not have a medical degree. Even if he did, a medical degree  
15 is not sufficient to qualify Mr. Kroll as an expert in toxicology, as set forth above  
16 with respect to Dr. Vilke. *See supra* at pp. 7-8. Defendants have provided no  
17 evidence that Mr. Kroll has any expertise in toxicology or anesthesiology, and the  
18 "qualifications" stated in his expert report reveal no training or expertise in  
19 toxicology or anesthesiology. Kroll Report (Ex. M) at 5-7, 59-63. At his  
20 deposition, Mr. Kroll admitted that "as a general matter [he is] not qualified to  
21 opine on the analgesic effect of drugs and alcohol on the human body" and does  
22 not "hold [him]self out as a toxicologist, [or] anesthesiologist." Kroll Depo. (Ex.  
23 O) at 19:18-22. He further admitted that he is not "qualified to opine on the  
24 physical mechanisms by which pain is experienced in the human body." Kroll  
25 Depo. (Ex. O) at 22:1-4.

26 Although Mr. Kroll claimed that he had expertise on these issues if they  
27 arise in the context of electric shocks (Kroll Depo. (Ex. O) at 19:15-21:21, 22:4-  
28 14), in multiple instances, Mr. Kroll was unable to explain the factual basis for his  
opinion, stating either that he simply didn't know and/or that "you would have to  
ask a toxicologist." Kroll Depo. (Ex. O) at 81:15; *see also id.* at 84:2-4 ("that

1 would be a better question for a [] toxicologist.”); *id.* at 91:9-10 (“That is definitely  
2 a question for a forensic toxicologist”). Similarly, although Mr. Kroll claimed that  
3 he “ha[s] a lot of publications on the effects of interactions of drugs with electrical  
4 shocks on the human body” (Kroll Depo. (Ex. O) at 19:23-25), the only materials  
5 cited in his report are generic publications regarding the analgesic effect of drugs  
6 and alcohol generally, not in relation to electric shocks by Taser ECDs or in  
7 relation to the specific mixture of narcotics / alcohol in Mr. Aguilar’s blood or the  
8 levels of narcotics / alcohol in his blood. Those publications do not establish that  
9 Mr. Aguilar, at the levels of drugs and alcohol in his system, would have felt  
10 minimal or no pain. Mr. Kroll neither cited nor produced any of his claimed supply  
11 of publications on the effects of interactions of drugs with electrical shocks on the  
12 human body, and at his deposition he could not substantiate his claim that Mr.  
13 Aguilar felt no or minimal pain from the Taser shocks, either by reference to those  
14 publications or otherwise.

15 Mr. Kroll’s professed opinion, that the levels of substances in Mr. Aguilar’s  
16 blood were sufficient to reduce his pain to zero or minimize it, requires expertise in  
17 toxicology (to know the significance of particular levels of drugs and alcohol in the  
18 system) and neurology (to understand the pain mechanisms of the body). Mr. Kroll  
19 admitted that he has no such knowledge or expertise:

20 Q: You are not a medical or a scientific toxicologist; is that correct?

21 A: That’s correct.

22 **Q: And so you personally cannot opine that the levels of narcotics**  
23 **or alcohol in Mr. Aguilar’s system are equivalent to or sufficient**  
24 **to minimize the pain experienced from a CEW<sup>2</sup> in relation to the**  
25 **studies that you’ve cited?**

26 **A: Not as I sit here this second.** But now that you’ve got me curious,

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27 <sup>2</sup> The TASER device used in this case was a type of Conducted Energy  
28 Weapon (CEW) or Electronic Control Device (ECD). Both acronyms are used to  
refer to the category of weapons that includes the TASER X26P used by Defendant  
Medina.

1 I'm going to go to the literature and see if those analgesic effects  
2 correspond to the recreational effects. I know that's the case for  
3 alcohol because I do recall those doses were in a recreational area, and  
4 for some people recreational levels of alcohol are quite high. And I'm  
not sure about the other drugs.

5 Q: So let's focus on alcohol then. What level of alcohol was in Mr.  
6 Aguilar's bloodstream?

7 A: I don't recall.

8 Q: So how do you know that it was a level that was sufficient to  
9 minimize the effect of a CEW based on the studies that you cite?

10 A: We don't have – I don't have a hard number in front of me. And  
11 that opinion was based on the idea that he had a recreational level of  
12 alcohol in him. And we know from other studies that recreational  
13 levels of alcohol offer significant analgesic effects, and that's not  
exactly a surprise because the expression of "feeling no pain" has  
been around for a long time.

14 Q: [W]hat is the range of recreational levels of alcohol in someone's  
15 blood?

16 A: Well, from personal experience I can tell you that it varies a lot.

17 Q: Okay. So you're saying that any level of alcohol in a person's  
18 blood minimizes the effect of a CEW deployment?

19 A: I'm not saying that.

20 Q: Okay.

21 A: I can tell you from analyzing a lot of cases people that were drunk  
22 enough to get in trouble appear to be drunk enough to not be bothered  
23 by a CEW, unless there's a very broad probe spread which locks up  
the muscles.

24 Q: [I]n how many cases did a person have a .07 blood alcohol level  
25 and did not feel pain?

26 A: I don't know.

27 Q: In how many cases did a person have a .07 blood alcohol level and  
28 did feel pain?

A: That's basically dual of the first question, so I don't know what the  
cutoff is. I'm not sure that has been studied. . . .



1 Q: Are you aware that Mr. Aguilar did not attract the attention of law  
2 enforcement due to any behavior based on drug or alcohol  
3 intoxication?

4 . . . .

5 A: I think I do recall that. [H]e was arrested because he was in an area  
6 that he was forbidden to be in, if I recall correctly. . . . It wasn't really  
7 material to my opinion, but it does appear to be different from the  
8 typical case where someone is acting crazy and the police are called.

9 Q: And that typical case is what you were referring to in terms of the  
10 cases you reviewed where the TASER – the CEW appeared to have  
11 minimal pain effect based on the presence of narcotics or alcohol.

12 A: The ones that come to mind right now would fit that pattern. . . .

13 Kröll Depo. (Ex. O) at 84:5-88:22. Mr. Kröll used the term “recreational level” to  
14 refer to the drugs and alcohol in Mr. Aguilar’s system, but he admitted that he had  
15 no basis for knowing that the drugs in Mr. Aguilar’s system were at a “recreational  
16 level” and he could not even define what a “recreational level” would be.

17 Q: So you said that Mr. Aguilar had recreational levels in his system.  
18 What’s your basis for saying that?

19 A: I’m not sure why somebody would take drugs, if it wasn’t fun.

20 Q: Are you able to opine on how the level of a substance, narcotic or  
21 alcohol, reduces over time following a person’s consumption of that  
22 substance?

23 A: That’s nothing I will opine on. I happen to know the rough number  
24 for alcohol just because I have been involved in some many cases  
25 where it’s come up; but no. That would be outside of my area of  
26 expertise.

27 Q: So you . . . know that there was some amount measured in the  
28 toxicology report of certain substances; correct?

A: Yes.

Q: But you do not know how long prior to his arrest Mr. Aguilar did  
or did not consume these substances; is that correct?

A: That’s correct. . . . I mean, presumably, it wasn’t the day before. So  
presumably it was the same day, but –



1 Q: Why do you say that?

2 A: -- we really don't know. Well, based on the clearance level of  
3 alcohol, we can -- that's a pretty safe bet. Clearance rate of alcohol.  
4 Forgive me. But I don't -- know. I will withdraw that answer. I really  
5 don't. If you're suggesting he had a big binge the night before and he  
6 still had this residual level, I can't refute that, and I'm not a medical  
7 toxicologist. I don't deal in the clearance rats of these drugs.

8 Q: And nothing about the levels in the toxicology report is the basis  
9 for your statement that he had recreational -- quote, unquote,  
10 recreational levels. Is that a correct statement?

11 A: That's correct.

12 Kroll Depo. (Ex. O) at 93:19-95:11. In essence, Mr. Kroll was using the term  
13 "recreational level" unscientifically to refer to all illicit drug use, without regard  
14 for how long drugs stay in the system or the amount of drugs taken by a  
15 recreational user. He certainly was not using the term in relation to the actual levels  
16 of drugs and alcohol in Mr. Aguilar's blood.

17 As demonstrated in the quoted testimony above, Kroll is unqualified to offer  
18 Opinion No. 6 and has no factual basis for Opinion No. 6, and therefore it should  
19 be excluded. *Summers v. Missouri Pacific R.R. System*, 897 F. Supp. 533, 540  
20 (E.D. Okla. 1995), *aff'd*, 132 F.3d 599 (10th Cir. 1997), ("[T]he neurophysiological  
21 evaluation of Plaintiff Summers by Dr. Susan Franks, Ph.D. should be excluded  
22 because Dr. Franks, a psychologist, is not an expert in the field of medicine or  
23 toxicology."); *Jones v. Lincoln Elec. Co.*, 188 F.3d 709, 724 (7th Cir. 1999) (expert  
24 witness admitted he was "not a toxicologist and that toxicology and how certain  
25 substances are absorbed into the body were areas that were outside of his  
26 expertise" and therefore "the underlying basis for the medical conclusions to which  
27 [he] testified . . . were rooted in medical knowledge and training which [he] did not  
28 have.") Because the subject matter of Mr. Kroll's opinion on analgesics is well  
beyond his area of expertise, it is unreliable and therefore inadmissible under FRE  
702.

1                   **3. Mr. Kroll's Opinion No. 6 Is Not Based on Sufficient Facts**  
2                   **or Data, Much Less Reliable Principles and Methods that**  
3                   **Were Applied Reliably to the Facts of this Case.**

4                   Mr. Kroll's opinion on analgesics is not based off scientific reasoning or  
5 methodology and is not reliable. Mr. Kroll did not consider the levels of substances  
6 in Mr. Aguilar's bloodstream at his time of death when he formulated his opinion,  
7 but rather assumed each substance was at a "recreational level." When asked his  
8 basis for determining that the level was "recreational," he stated that "[he was] not  
9 sure why somebody would take drugs, if it wasn't fun." Kroll Depo. (Ex. O) at  
10 93:19-23. Mr. Kroll went on to confirm that "nothing about the levels in the  
11 toxicology report is the basis" for his statement that Mr. Aguilar had "recreational  
12 levels" of substances in his system. Kroll Depo. (Ex. O) at 95:6-13.

13                   Experts in the field of forensic toxicology would require specific scientific  
14 data and facts to form opinions on toxicology, including information on the exact  
15 substance levels in Mr. Aguilar's system, when those substances were ingested,  
16 and how those substances interacted with one another. As set forth above, Mr.  
17 Kroll confirms that he does not know any of these facts in his deposition. *See*  
18 *supra* at pp. 15-18. The dose-response relationship is the hallmark of toxicology,  
19 and in this case, Mr. Kroll did not have knowledge of the dosages when  
20 formulating his opinion. *See McClain v. Metabolife Int'l, Inc.*, 401 F.3d 1233, 1240  
21 (11th Cir. 2005) (holding that expert witness opinion on toxicity lacked necessary  
22 indicia of reliability where expert was not a toxicologist or medical doctor, offered  
23 "speculative conclusions" regarding a substance's toxicity from "questionable  
24 principles of pharmacology" and disregarded the "dose-response relationship").  
25 Experts in the field of toxicology could not arrive at Mr. Kroll's conclusion based  
26 solely on his assumptions, and therefore his testimony should be excluded.

27                   Reliability is determined by assessing "whether the reasoning or  
28 methodology underlying the testimony is scientifically valid," whereas relevance  
depends upon "whether [that] reasoning or methodology properly can be applied to

1 the facts in issue.” *Daubert*, 509 U.S. at 592–93. “In a case involving scientific  
2 evidence, evidentiary reliability will be based upon scientific validity, which is, in  
3 turn, assessed in large part by the degree to which the theories propounded by  
4 the expert have been subjected to and survived scrutiny in the relevant scientific  
5 community.” *Barabin v. AstenJohnson, Inc.*, 700 F.3d 428 (9th Cir. 2012).

6 Mr. Kroll did not use scientific methodology to arrive at his opinion. He was  
7 not aware of the dosage of the drugs in Mr. Aguilar’s system, the levels of drugs  
8 that would result in an analgesic effect, or the degree to which the analgesic effect  
9 would reduce the pain caused by a Taser discharge. His opinion completely lacks  
10 factual and scientific foundation, and therefore should be excluded. *See, e.g., U.S.*  
11 *v. Scholl*, 166 F.3d 964, 971 (9th Cir. 1999) (excluding expert testimony where  
12 expert was unable to identify any support in the psychiatric literature for her  
13 position that gamblers may believe they are truthfully representing wins and  
14 losses); *Reger v. A.I. DuPont Hosp. for Children of Nemours Foundation*, 259 Fed.  
15 App’x 499, 500 (3d Cir. 2008) (expert testimony was not admissible where it was  
16 based on subjective belief and lacked any support by citation or reference to any  
17 scientific data or tests); *Cabrera v. Cordis Corp.*, 134 F.3d 1418, 1423 (9th Cir.  
18 1998) (expert physician’s testimony failed the reliability requirement of FRE 702  
19 where expert could not point to peer-reviewed articles or research supporting his  
20 position, failed to explain how he reached his conclusions and could not point to an  
21 objective source to show how he used the scientific method.).

22 **4. Mr. Kroll’s opinion should be excluded because the studies**  
23 **he cites are irrelevant to the facts of this case and would not**  
24 **assist a jury.**

25 In addition to his lack of basis and knowledge of the relevant drug doses, the  
26 research and studies referenced by Mr. Kroll provide no relevant support for his  
27 opinion that Mr. Aguilar did not feel pain. When an expert relies on the studies of  
28 others, he must not exceed the limitations the authors themselves place on the  
study. That is, he must not draw overreaching conclusions. *McClain v. Metabolife*

1 *Int'l, Inc.*, 401 F.3d 1233, 1245-47 (11th Cir. 2005) (expert's "inclination to draw  
2 overreaching conclusions from self-limiting medical articles[] show[ed] the  
3 speculative nature of his opinions."; "[T]he courtroom is not the place for scientific  
4 guesswork, even of the inspired sort." (quoting *Rosen v. Ciba-Geigy Corp.*, 78  
5 F.3d 316, 319 (7th Cir. 1996))).

6 **a. Methamphetamine / Amphetamine**

7 In Mr. Kroll's deposition, he testified that he had no recollection of any  
8 publication or research he had personally performed that looked at the interaction  
9 between methamphetamines or amphetamines and electric shock. 22:15-23:11.  
10 Rather, on the point of methamphetamine as an analgesic, in his expert opinion,  
11 Mr. Kroll cites a 1964 study of a mixture of Methamphetamine and Pentazocine  
12 and a 1962 study of sympathomimetics. Kroll Report (Ex. M) at 18, 53. Both of  
13 these studies were conducted on rats. *Id.*; Weisberg Decl. ¶ 4.

14 It is well established that extrapolating study results across species and  
15 across dose rates to answer causal questions about humans is problematic.<sup>3</sup> The use  
16 of dissimilar animal studies alone has been cited as grounds for the exclusion of  
17 testimony. In *Hollander v. Sandoz Pharm. Corp.*, 95 F. Supp. 2d 1230, 1239 (W.D.  
18 Okla. 2000), *aff'd in part and remanded*, 289 F.3d 1193 (10th Cir. 2002), the court

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19  
20 <sup>3</sup> "Animal studies have two significant disadvantages, however. First, animal  
21 study results must be extrapolated to another species-human beings-and differences  
22 in absorption, metabolism, and other factors may result in interspecies variation in  
23 responses." Michael D. Green, et al., *Reference Guide on*  
24 *Epidemiology*, in *Reference Manual on Scientific Evidence* 346. See also *Wade-*  
25 *Greaux v. Whitehall Laboratories, Inc.*, 874 F. Supp. 1441, 1483 (D.V.I. 1994),  
26 *aff'd*, 46 F.3d 1120 (3d Cir. 1994) (plaintiff alleged that primatene cold medicine  
27 taken by mother during pregnancy caused birth defect. However, there were no  
28 strong animal studies supporting this assertion); *Bell v. Swift Adhesives, Inc., a div.*  
*of Reichhold Chemicals, Inc.*, 804 F. Supp. 1577, 1580 (S.D. Ga. 1992) ("Nothing  
in the record persuades this Court to depart ... from precedent and allow plaintiff  
to rely primarily upon animal studies to carry her burden on the issue of  
causation.").

1 rejected plaintiffs’ experts’ attempt to extrapolate from animal studies to show that  
2 a medicine caused strokes in a products liability case, citing that the studies were  
3 “too dissimilar to the facts” and the studies “involved different drugs, [and] did not  
4 test the systemic effect of the drug.” *Id.* at 1238.

5 Here, the studies cited by Mr. Kroll do not involve the same drugs or the  
6 same species as the case at bar. When asked whether the methamphetamine  
7 distributed during the studies and that found in the street are even chemically  
8 similar, Mr. Kroll stated that whether they were similar was “definitely a question  
9 for a forensic toxicologist.” Mr. Kroll’s testimony demonstrates that he is not an  
10 expert on the analgesic effects of drugs and cannot draw any useful comparison  
11 between Mr. Aguilar’s case and the studies he cites: “I don’t know if I can speak to  
12 the effect of the – any drug isolation there . . . whether or not a recreational dose is  
13 comparable to the therapeutic dose, that would be a better question for a medical  
14 toxicologist or a scientific toxicologist, for that matter.” Kroll Depo. (Ex. O) at  
15 83:13-84:4. Thus, Mr. Kroll’s lack of knowledge on both the facts of the case and  
16 toxicology are not remedied by his citations.

17 **b. Alcohol**

18 Mr. Kroll cites two studies from 1978 and 1988 to relating to the analgesic  
19 effect of alcohol. Kroll Report (Ex. M) at 18, 53. However, these studies do not  
20 have any bearing on the facts in this case. Among other problems, these studies do  
21 not address the amount of pain reduction associated with different amounts of  
22 alcohol and rather address only the comparative analgesic effectiveness of alcohol  
23 with respect to other analgesics, such as morphine. Weisberg Decl. ¶ 5. Further, the  
24 studies did not involve electric shock or the use of electronic control devices (*id.*),  
25 and therefore they do not address the pain associated with the use of Tasers or  
26 other ECDs and do not establish the degree to which alcohol, at any level,  
27 minimizes the pain caused by a Taser. In other words, these studies do not provide  
28 any basis for Mr. Kroll’s opinion that Mr. Aguilar did not feel pain from the Taser

1 charges.

2 **c. Morphine / Heroin**

3 Mr. Kroll similarly departs from the scientific method when opining about  
4 the analgesic effect of heroin / morphine in Mr. Aguilar's system. Mr. Kroll  
5 referenced studies where morphine is administered to patients in the "ballpark of  
6 ten milligrams," as this amount is "used as something that makes a difference for  
7 electrical shocks." Kroll Depo. (Ex. O) at 81:6-15; 82:14-83:3. Mr. Kroll stated  
8 that for "how that translates into levels in the blood, you would have to ask a  
9 toxicologist." Kroll Depo. (Ex. O) at 81:6-15. Mr. Aguilar's autopsy showed a  
10 concentration of three micrograms per milliliter in his blood. Mr. Kroll admitted  
11 having no knowledge of the significance of this concentration to the research  
12 performed with the administration of ten milligrams of morphine. As such, the  
13 research cited by Mr. Kroll does not provide any support for the opinion claimed  
14 by Mr. Kroll and demonstrates his lack of understanding of toxicology and  
15 analgesics.

16 Because the support Mr. Kroll provides for his opinion on analgesics is  
17 based in irrelevant and inapplicable studies, including animal studies, and not in  
18 Mr. Kroll's own knowledge and expertise or on any reliable facts, data, or  
19 scientific method, his Opinion No. 6 is irrelevant and is inadmissible.

20 **5. Mr. Kroll's Unfounded Opinions Cannot Be Cured by**  
21 **Further Research, in Violation of the Disclosure**  
22 **Requirements of Fed. R. Civ. P. 26(a)(2).**

23 As set forth above, Mr. Kroll was unable in his deposition to provide the  
24 necessary facts or data that would support his Opinion No. 6. At several points,  
25 Mr. Kroll indicated that he would conduct further research prior to trial, in an  
26 attempt to answer the fundamental questions that he failed to investigate prior to  
27 giving a baseless opinion on whether Mr. Aguilar felt pain due to analgesics in his  
28 system. For example, when asked in his deposition whether the studies he referred  
to were conducted using methamphetamine that was chemically different from



1 methamphetamine found on the street, Mr. Kroll responded: “I mean, I can  
2 certainly read the papers, but nothing I intend to opine on. Well, I take it back.  
3 Now that you suggest it, I will read those papers in case it comes up at trial.” Kroll  
4 Depo. (Ex. O) at 91:5-18. When later asked to confirm that nothing in the  
5 toxicology report was the basis for his opinion that Mr. Aguilar has recreational  
6 level of drugs in his system, Mr. Kroll replied: “That's correct. And I thank you for  
7 suggesting that because I will review that literature in case it comes up at trial.”  
8 Kroll Depo. (Ex. O) at 95:6-12. When asked whether the levels of substance in Mr.  
9 Aguilar’s system could be compared to the levels in the studies he cited, Mr. Kroll  
10 answered that he didn’t know, “But now that you’ve got me curious, I’m going to  
11 the literature and see if those analgesic effects correspond to the recreational  
12 effects.” Kroll Depo. (Ex. O) at 84:9-21.

13 Federal Rule of Civil Procedure 26(a)(2), requires that an expert report  
14 disclose: “[A] complete statement of all opinions the witness will express” as well  
15 as “the factual basis and reasons for them.” Fed. R. Civ. P. 26(a)(2)(B)(i). Rule  
16 26(e) permits a party to submit timely supplements to their Rule 26(a) disclosures.  
17 Rule 37(c) states: “If a party fails to provide information or identify a witness as  
18 required by Rule 26(a) or (e), the party is not allowed to use that information or  
19 witness to supply evidence on a motion, at a hearing, or at a trial, unless the failure  
20 was substantially justified or is harmless.” Fed. R. Civ. P. 37(c)(1).

21 Under Rule 37, the general rule is that failure to comply with the disclosure  
22 requirements of Rule 26(a), including the expert report disclosure requirements,  
23 results in exclusion of evidence. *Id.*, Advisory Comm. Note; *ClearOne Commc'ns,*  
24 *Inc. v. Biamp Sys.*, 653 F.3d 1163, 1176 (10th Cir. 2011) (exclusion is the “general  
25 rule”). Thus, “Rule 37(c)(1) gives teeth to the [expert report] requirements by  
26 forbidding the use at trial of any information required to be disclosed by Rule 26(a)  
27 that is not properly disclosed.” *Yeti by Molly, Ltd. v. Deckers Outdoor Corp.*, 259  
28 F.3d 1101, 1106 (9th Cir. 2001) (affirming exclusion of expert witness where party

disclosed expert's identity but failed to timely disclose an expert report)

The failure to timely provide the information required by Federal Rule of Civil Procedure 26(a)(2)(B), including the "bases and reasons" for an expert opinion, prejudices an opposing party. *See, e.g., Yeti*, 259 F.3d at 1107 (affirming exclusion of expert because "Plaintiffs received [the late expert] report one month before they were to litigate a complex case" when they did not have enough time to prepare to depose and cross-examine the expert at trial).

Mr. Kroll has not supplemented his expert report since the time of his deposition. Weisberg Decl. ¶ 6. From Mr. Kroll's deposition, cited at length in this motion, it is clear that at the time Mr. Kroll issued his opinion, he had no factual basis at all that would support the broad statement he made that the analgesic substances in Mr. Aguilar's blood prevented him from feeling any pain. Mr. Kroll cannot cure this failure by arriving at trial with new studies and data that were not disclosed in his expert report or his deposition testimony. Such a tactic would violate the Federal Rules of Civil Procedure, requiring advance disclosure, and severely prejudice Plaintiffs who would have no adequate opportunity to prepare and respond. Accordingly, Mr. Kroll's Opinion No. 6 should be excluded for the reasons set forth in this motion with respect to Federal Rule of Evidence 702 and, to the extent that Mr. Kroll attempts to belatedly offer an actual factual or scientific basis for his testimony, for Mr. Kroll's failure to comply with the disclosure requirements of Federal Rule of Civil Procedure 26(a).

#### **IV. CONCLUSION**

For all of the foregoing reasons, Plaintiffs request that the Court exclude Vilke Opinion No. 4 and Kroll Opinion No. 6.

Respectfully Submitted,  
Kaye, McLane, Bednarski & Litt, LLP

DATED: September 4, 2018

By: /s/ Caitlin S. Weisberg  
Ronald O. Kaye  
Caitlin S. Weisberg



Attorneys for Plaintiffs

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